PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

indicated unless correct maintenance fee notifics	ed below or directed of idons.	ng the Patent, advance of herwise in Block 1, by (rders and nonlication of (a) specifying a new com			should be completed where t correspondence address as arase "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block) for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
2141 WISCONS SUITE C-2	& LIEBERMAN SIN AVE, N.W.	5,2007 I, LLC		Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WASHINGTON, DC 20007				(Depositor's name)		
					***************************************	(Signature)
					***************************************	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R.	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/682,048	그렇게 하는 뒤에게 되었다. 그는 그는 그 사람이 가장이 누워 되었다.		Walter L. Pock	PECK		2678
TITLE OF INVENTION			•			,
appln. Type	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE			
nonprovisional	YES	\$700 ARTUNIT	\$300	,so T	\$1000	09/17/2007
EXAMINER HAYES, BRET C		L	CLASS-SUBCLASS	J		
HAYES, BRET C 3541 047-047000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Michae L. Cret						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. [] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. [] Or agents OR. (2) the name or registered store registered store 2 registered par listed, no name				single firm (having as a member a by or agent) and the names of up to at attorneys or agents. If no name is a sill be printed.		
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (grint or type) PLEASE NOTE: Unless an assignee is identified below, no assignee dats will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent):						
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Sassue Fee A check is enclosed. Psyment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fee(s), any deficiency, or credit as overpayment, to Deposit Account Number 500355 (enclose an extra copy of this f						
	us (from status indicated SMALL ENTITY statu				ENTITY status, See 37 Cr	
NOTE: The Issue Fee and nterest as shown by the n	Publication Fee (if requeends of the United State	nired) will not be accepted les Patent and Trademark	from anyone other than t		and the same of th	e assignee or other party in
Authorized Signature				Date: 9/	12/07	
Typed or printed name	Michael	L. Green	beg. Esz.	Registration No.	12/07 4 73/2	<u> </u>
This collection of information is required by 37 CFR 1.31). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and ubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Sox 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						
	•••••	·····	***************************************			